

Assumption of the Risk and Waiver of Liability Relating to Coronavirus / COVID-19

Tapawingo Campers

Dear Campers and Parents,

As we look forward to this summer and having your daughter join us, we recognize that the world, along with Upstate New York, is still dealing with the impact and uncertainties of the global COVID-19 pandemic. You have undoubtedly taken this issue under serious consideration in deciding to attend Camp this summer. As we prepare for Camp during this unusual time, we are implementing extensive measures to make the Camp as safe as possible. However, there are still many variables that continue to change. Therefore, we have been advised to ask all parents to sign this acknowledgement and waiver of liability as a condition of attending camp. We appreciate your understanding and cooperation.

The novel coronavirus, COVID-19, is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and limiting large group gatherings.

Tapawingo has, so far as is reasonably practical, implemented procedures and preventative measures to protect its campers and staff in order to reduce the spread of COVID-19 (based on CDC, state, and local health department guidelines); however, Tapawingo cannot guarantee that your daughter(s) will not become infected with COVID-19. Further, attending Tapawingo could increase your daughter's risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my daughter(s) may be exposed to or infected by COVID-19 by attending Tapawingo and that such exposure or infection may result in personal injury, illness, permanent disability, and death.

I understand that the risk of becoming exposed to or infected by COVID-19 at Tapawingo may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Tapawingo/Gospel Volunteers, Inc. employees, volunteers, members, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my daughter(s) (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I and/or my daughter(s) may experience or incur in connection with attendance at Tapawingo ("Claims").

On my behalf, and on behalf of my spouse and child(ren), I hereby release, covenant not to sue, discharge, and hold harmless Tapawingo/Gospel Volunteers Inc, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Tapawingo/Gospel Volunteers, Inc., its employees, volunteers, members, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Tapawingo program.

I, as the legal guardian of my daughter(s), name listed below, give permission to Tapawingo to perform screening, diagnostic, and/or mitigation testing for COVID-19 on my child with a COVID-19 test either through nasal swabs or saliva specimens. The expense of these tests may or may not be covered by insurance and therefore I could be responsible for the costs associated with testing. I am aware that if my daughter tests positive I may be responsible for picking her up from camp within 24 hours of being notified.

If my daughter is considered a high-risk or vulnerable individual due to medical conditions, I understand that it is my responsibility to discuss with my daughter's primary care provider the COVID exposure risks and determine if it is safe to send my daughter to camp. By signing this I acknowledge my responsibility and my consent to send my daughter to camp.

I have been made aware of the requirements for a pre-arrival screening form to be completed for 10 days prior to coming to camp. I have been made aware of the screening questionnaire to be completed upon arrival to camp, and if any of the answers to the questions are "yes," my daughter(s) may be unable to complete registration and attend camp at that time.

Parent Signature _____ Date _____

Print Name _____

Camper Name _____